UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re:

Case No. 09-41434

JEFFREY ROBERT POULSEN AMY BETH VAYR-POULSEN Debtor(s)

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 10/31/2009.
- 2) The plan was confirmed on 01/08/2010.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on NA .
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on <u>NA</u>.
 - 5) The case was completed on 04/05/2011.
 - 6) Number of months from filing to last payment: <u>17</u>.
 - 7) Number of months case was pending: <u>20</u>.
 - 8) Total value of assets abandoned by court order: <u>NA</u>.
 - 9) Total value of assets exempted: \$41,300.00.
 - 10) Amount of unsecured claims discharged without payment: \$6,588.00.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$25,709.50 Less amount refunded to debtor \$2,213.81

NET RECEIPTS: \$23,495.69

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$1,750.00
Court Costs \$0.00
Trustee Expenses & Compensation \$1,243.68
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION: \$2,993.68

Attorney fees paid and disclosed by debtor: \$1,750.00

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
CCS	Unsecured	234.00	NA	NA	0.00	0.00
CONDELL MEDICAL CENTER	Unsecured	583.00	NA	NA	0.00	0.00
FORD MOTOR CREDIT CO	Unsecured	13,238.00	13,237.24	13,237.24	13,237.24	0.00
GMAC RESCAP LLC	Secured	32,300.00	5,859.12	5,859.12	5,859.12	0.00
GMAC RESCAP LLC	Secured	0.00	0.00	0.00	0.00	0.00
HARLEY DAVIDSON CREDIT	Secured	0.00	0.00	0.00	0.00	0.00
LAKE COUNTY RADIOLOGY	Unsecured	142.00	NA	NA	0.00	0.00
LAKE FOREST HOSPITAL	Unsecured	800.00	NA	NA	0.00	0.00
LAKE FOREST HOSPITAL	Unsecured	343.00	NA	NA	0.00	0.00
LAKE SHORE PATHOLOGISTS	Unsecured	121.00	NA	NA	0.00	0.00
LAKE SHORE PATHOLOGISTS	Unsecured	245.00	NA	NA	0.00	0.00
LAURETTE FERRARESI PHD	Unsecured	194.00	NA	NA	0.00	0.00
LIBERTYVILL FIRE DEPARTMENT	Unsecured	650.00	NA	NA	0.00	0.00
MEDICAL RECOVERY SPECIALISTS	Unsecured	2,638.00	NA	NA	0.00	0.00
VAN RU CREDIT	Unsecured	367.00	NA	NA	0.00	0.00
VERIZON WIRELESS	Unsecured	1,511.00	1,280.65	1,280.65	1,280.65	0.00
VISTA CLINIC CORPORATION	Unsecured	271.00	NA	NA	0.00	0.00
VISTA MEDICAL CENTER	Unsecured	3,881.00	125.00	125.00	125.00	0.00

Summary of Disbursements to Creditors:		-	
	Claim	Principal	Interes
	Allowed	<u>Paid</u>	<u>Paic</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$5,859.12	\$5,859.12	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$5,859.12	\$5,859.12	\$0.00
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$14,642.89	\$14,642.89	\$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$2,993.68 \$20,502.01	
TOTAL DISBURSEMENTS:		<u>\$23,495.69</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 07/12/2011 By: /s/ Glenn Stearns

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.